

OCP

FORM NO. 51-4AA
FEB 1952

CENTRAL INTELLIGENCE AGENCY

CLASSIFICATION SECRET CONTROL - U.S. OFFICIALS ONLY
SECURITY INFORMATION

50X1-HUM

INFORMATION REPORT

REPORT [redacted]

CD NO.

COUNTRY Bulgaria

DATE DISTR. 3 May 1952

SUBJECT Reserve Questionnaire

NO. OF PAGES 2

DATE OF INFO.

NO. OF ENCLS.
(LISTED BELOW)

PLACE ACQUIRED

50X1-HUM
SUPPLEMENT TO REPORT NO.

THIS DOCUMENT CONTAINS INFORMATION AFFECTING THE NATIONAL DEFENSE OF THE UNITED STATES, WITHIN THE MEANING OF TITLE 18, SECTIONS 793 AND 794, OF THE U.S. CODE, AS AMENDED. ITS TRANSMISSION OR REVELATION OF ITS CONTENTS TO OR RECEIPT BY AN UNAUTHORIZED PERSON IS PROHIBITED BY LAW. THE REPRODUCTION OF THIS FORM IS PROHIBITED.

THIS IS UNEVALUATED INFORMATION

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1. The following questionnaire, attached as Appendix A, was distributed in Sofia to members of the reserve. [redacted] the questionnaire was distributed to both reserve officers and regular reserve troops between the ages of 25 and 45. The distribution of this form is probably an indication of a trial conscription which would allegedly start 15 February 1952 [redacted]

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2. The following is a list of abbreviations used in the questionnaire:

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- a. VOS: Voenno Ottchetna Specialnost; Appropriate Military Specialty;
- b. BCP: Bulgarska Kommunisticheska Partiya; Bulgarian Communist Party;
- c. BNMS: Bulgarska Nenadelski Naroden Suyuz; Bulgarian National Agrarian Union;
- d. DSYM: Dimitrovska Suyuz Na Narodnata Mladezh; Dimitrov Union of People's Youth;
- e. EOPO: Edarma Oshchestveno Politicheska Organizatsiya; United Social-Political Organization; and
- f. OF: Otechestven Front; Fatherland Front.

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STATE	X	NAVY	X	NSRB	DISTRIBUTION	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]	[redacted]
ARMY	X	AIR	X	FBI							

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APPENDIX:

Read and complete accurately.

Q U E S T I O N N A I R E

- 1).....(occupational specialty, rank) (last name) (first name) (middle name)
- 2) Place of birth-city, village.....district.....date.....
- 3) Address: St.....number.....entrance number.....floor.....regional council.....
- 4) Work address: business.....street.....number.....regional council.....
- 5) Military identification booklet No.....branch of service.....appropriate military specialty.(VOS). No.....
- 6) General instruction.....specialty.....(designate specifically)
- 7) Which of the following organizations did you belong to.....(BCP, BZNS, DSNM, EOPO, OF)
- 8) Chief occupation.....supplementary.....
- 9) Last stamped by.....
- 10) Last enrolled at.....(city, village, regional council)
- 11) Have there been any changes in the state of your health since your last examination.....(specify exact nature of illness).

The questionnaire is to be completed within three days of its receipt.
 You will be held responsible for any inaccurate information in accordance with
 the law governing obligatory military service.

- Note:
- 1- For any difficulties encountered in filling out the questionnaire, refer to the Military Office in the regional council to which you belong.
 - 2- No. 8 is to be interpreted as follows: chief occupation-that at which you are employed at present- supplementary- occupation which you had previously, for example: you were a chauffeur and are now a clerk. The question should be answered in this way: Chief occupation- clerk, and supplementary- chauffeur.
 - 3- Answers to questions 9 and 10 should be taken, for non-commissioned officers and soldiers, from page 7 of the military identification booklet, and for officers from page 11.

Rubber stamp on the back of the questionnaire $3\frac{1}{2} \times 6$ cm.

- | |
|--|
| 12) In which branch of the service did you serve, duties performed, and length of time served..... |
| -1.(branch of service) (duty) |
| -2. |
| -3. |

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